Food Establishment Inspection Report – C	City/Town of Oxbridge MA
Establishment: Uxbrida D Hiah School	Date: 0/22/21 Page 1 of
Address: 300 Quaker HuyuUxbr	Time out:
Telephone: 278 - 8(023 Permit No.:	Number of Violated Provisions Related
Owner: Town of Uxhaida a	to Foodborne Illness Risk Factors and Interventions (Items 1 through 29):
Person-in-charge: Janice Ovellotte	Number of Repeat Violations Related
	to Foodborne Illness Risk Factors
Inspector: Kaitlin Vonanue	and Interventions (Items 1 through 29):
FOODBORNE ILLNESS RISK FACTORS / IN = in compliance OUT= out of compliance N/O = not observed N/A = not	
IN - III compliance OUT - out of compliance II/O - not observed II/A - not	t applicable COS = Corrected of Pate during hispection K = Tepeat violation
Compliance Status IN OUT N/A N/O COS R	Compliance Status IN OUT NA N/O COS I
Supervision	Protection from Contamination
1 Person-in-charge present, demonstrates	15 Food separated and protected
knowledge, and performs duties	Food-contact surfaces; cleaned &
2 Certified Food Protection Manager	sanitized V
Employee Health Management, food employee and	Proper disposition of returned, 17 previously served, reconditioned &
3 conditional employee; knowledge,	unsafe food
responsibilities and reporting	Time/Temperature Control for Safety
4 Proper use of restriction and exclusion	18 Proper cooking time & temperatures
5 Procedures for responding to vomiting and diarrheal events	Proper reheating procedures for hot holding
Good Hygienic Practices	20 Proper cooling time and temperature
6 Proper eating, tasting, drinking, or	21 Proper hot holding temperature
tobacco use	22 Proper cold holding temperature
No discharge from eyes, nose, and mouth	23 Proper date marking and disposition
Preventing Contamination by Hands	24 Time as a Public Health Control
8 Hands clean & properly washed	Consumer Advisory
9 No bare hand contact with ready-to-eat food	Consumer advisory provided for raw / undercooked food
Adequate handwashing sinks properly	Highly Susceptible Populations Pasteurized foods used; prohibited foods
supplied and accessible	not offered
Approved Source	Food/Color Additives and Toxic Substances
11 Food obtained from approved source 12 Food received at proper temperature	Food additives: approved & properly
Food received in good condition, cofe &	used
13 unadulterated	Toxic substances properly identified, stored & used
Required records available: shellstock tags, parasite destruction	Conformance with Approved Procedures
lage, paraone destruction	Compliance with variance / specialized process / HACCP Plan
Official Order for Correction: Based on an inspection today, the iter applicable sections of the 2013 FDA Food Code. This report, when s an order of the Board of Health. Failure to correct violations cited in t establishment permit and cessation of food establishment operations renewal pursuant to 105 CMR 590.000 you may request a hearing be	ems marked "OUT" indicated violations of 105 CMR 590.000 and signed below by a Board of Health member or its agent constitutes this report may result in suspension or revocation of the food s. If you are subject to a notice of suspension, revocation, or non-
Date of Reinspection: Discussion with Person-in-Charge:	
Signature of Person-in-Charge a ALLA A A	Date:

Form 734A-1 A.M. Sulkin Co., Charlestown, MA

Signature of Inspector:

Fo	od Establishme	nt Inspection	Report -	- Citv/	Town of Uxbride	7 Q)			
	ablishment: //Yho	idae Hic	16 Sa	h 00	Date: 0 0101		Pac	ge 2 of	21	٦
		OOD BETAIL PRA	TICES AND	MASSA	CHUSETTS-ONLY SECTIONS		i ag	JO 2 01	+=	-
IN:					able COS = corrected on-site during inspe	ction I	R = r	epeat v	riolatior	
			,							
eministration vic	Compliance Stat		N/A N/O COS R		Compliance Status	IN	ОСТ	N/A N/O	cos	R
		ood and Water		48	Warewashing facilities: installed,					
-311	Pasteurized eggs used required	where		10	maintained, & used; test strips Non-food contact surfaces clean		$\overline{}$			-
	Water & ice from appro	ved source		كونك ا	Physical Facilities		<u> </u>			
	Variance obtained for s			-	Hot & cold water available;		Ī			222
	processing methods	•		50	adequate pressure					
		perature Control		51	Plumbing installed; proper backflow	٧				
	Proper cooling methods	· • • • • • • • • • • • • • • • • • • •			devices					\dashv
	adequate equipment for temperature control			52	Sewage & waste water properly disposed					
	Plant food properly cool	ked for hot		53	Toilet features: properly					٦
	holding			53	constructed, supplied, & cleaned		S. C.			
_	Approved thawing meth	0.00000000		54	Garbage & refuse properly		and an angle			
36	Thermometers provided				disposed; facilities maintained Physical facilities installed,					_
		dentification		55	maintained, & clean		\checkmark			
	Food properly labeled; of container	original			Adequate ventilation & lighting;		7			
		Food Contamination			designated areas used		\vee			
38	nsects, rodents, & anin	nals not			Additional Requirements listed in 1	05 CM	R 59	0.011		
	present			_ M1	Anti-choking procedures in food service establishment					
	Contamination prevente food preparation, storag			M ₂	Food allergy awareness					
	display	je anu			Review of Retail Operations listed in	105 CI	MR :	590.010)	
	Personal cleanliness			M3	Caterer					30000
41	Wiping cloths: properly	used &		M4	Mobile Food Operation					
	stored			7 	Temporary Food Establishment					_
42	Washing fruits & vegeta	andream contract and the contract of the contr		a ——	Public Market; Farmers Market					_
<u>/</u> /3	In-use utensils properly	Jse of Utensils			Residential Kitchen; Bed-and- Breakfast Operation					•
	Utensils, equipment & li	20000		1	Residential Kitchen: Cottage Food	-	_	_		\dashv
	properly stored, dried, 8				Operation					
	Single-use / single-serv	ice articles:		I INDEM	School Kitchen; USDA Nutrition					
	properly stored & used				Program	+			\vdash	\dashv
46	Gloves used properly				Leased Commercial Kitchen Innovative Operation	+		_		\dashv
	otensiis, <u>Equi</u> Food & non-food contac	pment and Vending		IVI	Local Requirements					
	cleanable, properly desi			L1	Local law or regulation					222
	constructed & used			. —	Other					7
-		T 61 41	O4 -	-£4!						_
	pe of Operation(s): Food Service Establishment	Type of Inspection ✓ Routine	on: Other II	nformati	on:					
	Retail Food Store	☐ Re-inspection	ı							
	Residential: Cottage Foods Residential; Bed &	☐ Pre-operational ☐ Illness investigation								
Bre	eakfast	☐ General complaint								
	Mobile/Pushcart Femporary Food Estab.	☐ HACCP								
	Other	☐ Other	-							
-	ignature of Danasa in Chara-		<u> </u>	00 1		Date:				
	ignature of Person-in-Charg	Sauce	Quel	UUE -		Date:		t		
S	ignature of Inspector:	dett for.	(1) DALAI	his	L	Date O	/5	12 /	2l	
Foi	rm 734A-2 A.M. Sulkin (Co., Charlestown, MA	\			7		7	7	

stablishment:	Uxbri	dge	Hìgh Sch	OO Date: 0	9/22/21 / Pa	$ge \underbrace{\mathcal{J}}_{of} \underbrace{\mathcal{T}}_{e}$
item / Lo	cation	Temp (°F)	Temperature Ollitem / Location	bservations Temp (°F)	Item / Location	Temp (°F)
		C	bservations and/or (Corrective Actions	Section 8-405.11 of the Food	Code
Itom	n of Code	AF 9; Vas oc establ		on of Violation	spection	Date to Correct B
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C 191	1-1001.1		clean du	antinat	nd up fan	
Pf 10-4	11.10ah	lease	clean	can oper	ier blade.	CRI
C 506	-501.14 F	tood vi	ents must	be clear	red of dust	
PS 1104	501.1121	575° {	ishwasher	Temp Etested @	160° 1600	
Signature of P	spector:	atten o, Charlestown,	uellik Darah	ul	Dat Dat	/

ablish	nment:	bridge th	igh School	Date: 6	9/12/21 P	age 🔑 of 🗣
			Temperature Obse			T (9F)
lt	em / Location	Temp (°F)	Item / Location	Temp (°F)	Item / Location	Temp (°F)
			Observations and/or Cor	rective Actions		
em	Violations cited Section of Code	in this report must be	corrected within the time frame Description of		Section 8-405.11 of the Foo	Date to Correct
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